#### **ACTIVE**

TRADITIONAL PLAN					
Tier MDC Contribution Standard Monthly *Non-Tobacc					
		Premium	Monthly Premium		
Subscriber	\$343.37	\$201.58	\$161.58		
Subscriber + Spouse	\$686.76	\$363.16	\$323.16		
Subscriber + Child(ren)	\$652.42	\$347.00	\$307.00		
Subscriber + Family	\$738.26	\$387.40	\$347.40		

TRADITIONAL COBRA					
Tier MDC Contribution Standard Monthly *Non-Tobacco U					
		Premium	Monthly Premium		
Subscriber	\$0	\$555.85	\$515.85		
Subscriber + Spouse	\$0	\$1,070.92	\$1,030.92		
Subscriber + Child(ren)	\$0	\$1,019.41	\$979.41		
Subscriber + Family	\$0	\$1,148.18	\$1,108.18		

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)					
Tier	Tier MDC Standard Monthly *Non-Tobacco Use				
	Contribution	Premium	<b>Monthly Premium</b>		
Subscriber	\$273.86	\$168.88	\$128.88		
Subscriber + Spouse	\$547.73	\$297.74	\$257.74		
Subscriber + Child(ren)	\$520.34	\$284.86	\$244.86		
Subscriber + Family	\$588.80	\$317.08	\$277.08		

HDHP COBRA				
Tier MDC Standard Monthly *Non-Tobacco Use				
	Contribution	Premium	Monthly Premium	
Subscriber	\$0	\$451.60	\$411.60	
Subscriber + Spouse	\$0	\$862.38	\$822.38	
Subscriber + Child(ren)	\$0	\$821.31	\$781.31	
Subscriber + Family	\$0	\$924.00	\$884.00	

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

#### **RETIREE** (Retired prior to 1/1/13)

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TRADITIONAL PLAN			
Tier	MDC Contribution	Standard Member	*Non-Tobacco Use
		Premium	Monthly Premium
Subscriber-w/o Medicare	\$244.15	\$493.41	\$453.41
Subscriber- Medicare	\$100.40	\$226.46	\$186.46
Subscriber + Family-w/o			
Medicare	\$422.87	\$825.34	\$785.34
Subscriber + Family-			
Medicare	\$163.25	\$343.18	\$303.18
Subscriber 10ver/1Under	\$288.34	\$575.51	\$535.51

TRADITIONAL COBRA					
Tier	Tier MDC Contribution Standard Monthly *Non-Tob				
		Premium	<b>Monthly Premium</b>		
Subscriber-w/o Medicare	\$0	\$752.31	\$712.31		
Subscriber- Medicare	\$0	\$333.40	\$293.40		
Subscriber + Family-w/o					
Medicare	\$0	\$1,273.17	\$1,233.17		
Subscriber + Family-					
Medicare	\$0	\$516.56	\$476.56		
Subscriber 10ver/1Under	\$0	\$881.13	\$841.13		

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)				
Tier	MDC	Standard Monthly	*Non-Tobacco Use	
	Contribution	Premium	Monthly Premium	
Subscriber-w/o Medicare	\$221.41	\$451.19	\$411.19	
Subscriber- Medicare	\$80.82	\$190.10	\$150.10	
Subscriber + Family-w/o				
Medicare	\$379.17	\$744.15	\$704.15	
Subscriber + Family-				
Medicare	\$124.89	\$271.93	\$231.93	
Subscriber 10ver/1Under	\$237.79	\$481.61	\$441.61	

HDHP COBRA				
Tier	MDC	Standard Monthly	*Non-Tobacco Use	
	Contribution	Premium	<b>Monthly Premium</b>	
Subscriber-w/o Medicare	\$0	\$686.05	\$646.05	
Subscriber-Medicare	\$0	\$276.34	\$236.34	
Subscriber + Family-w/o				
Medicare	\$0	\$1,145.79	\$1,105.79	
Subscriber + Family-				
Medicare	\$0	\$404.76	\$364.76	
Subscriber 10ver/1Under	\$0	\$733.79	\$693.79	

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

#### RETIREE who is vested up to 14 years of State service

TRADITIONAL PLAN				
Tier	Tier MDC Contribution Standard Mei			
		Premium	<b>Monthly Premium</b>	
Subscriber-w/o Medicare	\$139.51	\$598.05	\$558.05	
Subscriber- Medicare	\$57.37	\$269.49	\$229.49	
Subscriber + Family-w/o				
Medicare	\$241.64	\$1,006.57	\$966.57	
Subscriber + Family-				
Medicare	\$93.29	\$413.14	\$373.14	
Subscriber 10ver/1Under	\$164.77	\$699.08	\$659.08	

TRADITIONAL COBRA				
Tier MDC Contribution Standard Monthly *Non-Tobacc				
		Premium	Monthly Premium	
Subscriber-w/o Medicare	\$0	\$752.31	\$712.31	
Subscriber- Medicare	\$0	\$333.40	\$293.40	
Subscriber + Family-w/o				
Medicare	\$0	\$1,273.17	\$1,233.17	
Subscriber + Family-				
Medicare	\$0	\$516.56	\$476.56	
Subscriber 10ver/1Under	\$0	\$881.13	\$841.13	

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)				
Tier	MDC Contribution	Standard Monthly Premium	*Non-Tobacco Use Monthly Premium	
Subscriber-w/o Medicare	\$126.52	\$546.08	\$506.08	
Subscriber- Medicare	\$46.18	\$224.74	\$184.74	

Subscriber + Family-w/o			
Medicare	\$216.66	\$906.66	\$866.66
Subscriber + Family-			
Medicare	\$71.36	\$325.46	\$285.46
Subscriber 10ver/1Under	\$135.88	\$583.52	\$543.52

LIDUD CORDA				
Tier	MDC	P COBRA Standard Monthly	*Non-Tobacco Use	
riei	Contribution	Premium	Monthly Premium	
Subscriber-w/o Medicare	\$0	\$686.05	\$646.05	
Subscriber-Medicare	\$0	\$276.34	\$236.34	
Subscriber + Family-w/o				
Medicare	\$0	\$1,145.79	\$1,105.79	
Subscriber + Family-				
Medicare	\$0	\$404.76	\$364.76	
Subscriber 10ver/1Under	\$0	\$733.79	\$693.79	

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

### RETIREE who is vested up to 15-19 years of State service

TRADITIONAL PLAN			
Tier	MDC Contribution	Standard Member	*Non-Tobacco Use
		Premium	Monthly Premium
Subscriber-w/o Medicare	\$174.39	\$563.17	\$523.17
Subscriber- Medicare	\$71.72	\$255.14	\$215.14
Subscriber + Family-w/o			
Medicare	\$302.05	\$946.16	\$906.16
Subscriber + Family-			
Medicare	\$116.61	\$389.82	\$349.82
Subscriber 10ver/1Under	\$205.96	\$657.89	\$617.89

TRADITIONAL COBRA			
Tier	MDC Contribution	Standard Monthly	*Non-Tobacco Use
		Premium	Monthly Premium
Subscriber-w/o Medicare	\$0	\$752.31	\$712.31
Subscriber- Medicare	\$0	\$333.40	\$293.40
Subscriber + Family-w/o			
Medicare	\$0	\$1,273.17	\$1,233.17
Subscriber + Family-			
Medicare	\$0	\$516.56	\$476.56
Subscriber 10ver/1Under	\$0	\$881.13	\$841.13

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)				
Tier	MDC	Standard Monthly	*Non-Tobacco Use	
	Contribution	Premium	Monthly Premium	
Subscriber-w/o Medicare	\$158.15	\$514.45	\$474.45	
Subscriber- Medicare	\$57.73	\$213.19	\$173.19	
Subscriber + Family-w/o				
Medicare	\$270.83	\$852.49	\$812.49	
Subscriber + Family-				
Medicare	\$89.20	\$307.62	\$267.62	
Subscriber 10ver/1Under	\$169.85	\$549.55	\$509.55	

HDHP COBRA						
Tier						
	Contribution	Premium	Monthly Premium			
Subscriber-w/o Medicare	\$0	\$686.05	\$646.05			
Subscriber-Medicare	\$0	\$276.34	\$236.34			
Subscriber + Family-w/o						
Medicare	\$0	\$1,145.79	\$1,105.79			
Subscriber + Family-						
Medicare	\$0	\$404.76	\$364.76			
Subscriber 10ver/1Under	\$0	\$733.79	\$693.79			

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

### RETIREE who is vested up to 20-24 years of State service

TRADITIONAL PLAN			
Tier	MDC Contribution	Standard Member	*Non-Tobacco Use
		Premium	Monthly Premium
Subscriber-w/o Medicare	\$209.27	\$528.29	\$488.29
Subscriber- Medicare	\$86.06	\$240.80	\$200.80
Subscriber + Family-w/o			
Medicare	\$362.46	\$885.75	\$845.75
Subscriber + Family-			
Medicare	\$139.93	\$366.50	\$326.50
Subscriber 10ver/1Under	\$247.16	\$616.70	\$576.70

TRADITIONAL COBRA			
Tier MDC Contribution Standard Monthly *Non-Tobacco Use Premium Monthly Premium			
Subscriber-w/o Medicare	\$0	\$752.31	\$712.31

Subscriber- Medicare	\$0	\$333.40	\$293.40
Subscriber + Family-w/o			
Medicare	\$0	\$1,273.17	\$1,233.17
Subscriber + Family-			
Medicare	\$0	\$516.56	\$476.56
Subscriber 10ver/1Under	\$0	\$881.13	\$841.13

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)				
Tier	MDC	Standard Monthly	*Non-Tobacco Use	
	Contribution	Premium	Monthly Premium	
Subscriber-w/o Medicare	\$189.78	\$482.82	\$442.82	
Subscriber- Medicare	\$69.28	\$201.64	\$161.64	
Subscriber + Family-w/o				
Medicare	\$325.00	\$798.32	\$758.32	
Subscriber + Family-				
Medicare	\$107.05	\$289.77	\$249.77	
Subscriber 10ver/1Under	\$203.82	\$515.58	\$475.58	

HDHP COBRA					
Tier MDC Standard Monthly *Non-Tobacco Use Contribution Premium Monthly Premium					
Subscriber-w/o Medicare	\$0	\$686.05	\$646.05		
Subscriber-Medicare	\$0	\$276.34	\$236.34		
Subscriber + Family-w/o					
Medicare	\$0	\$1,145.79	\$1,105.79		
Subscriber + Family-					
Medicare	\$0	\$404.76	\$364.76		
Subscriber 10ver/1Under	\$0	\$733.79	\$693.79		

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

### **CONSERVATION EMPLOYEES' BENEFIT PLAN**

2013 Medical Insurance Premium Rate Structure

### **RETIREE** with 25 years of State service

TRADITIONAL PLAN			
Tier	MDC Contribution	Standard Member Premium	*Non-Tobacco Use Monthly Premium
Subscriber-w/o Medicare	\$244.15	\$493.41	\$453.41
Subscriber- Medicare	\$100.40	\$226.46	\$186.46
Subscriber + Family-w/o			
Medicare	\$422.87	\$825.34	\$785.34
Subscriber + Family-			
Medicare	\$163.25	\$343.18	\$303.18

Subscriber 10ver/1Under	\$288.34	\$575.51	\$535.51
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TRADITIONAL COBRA			
Tier	MDC Contribution	Standard Monthly	*Non-Tobacco Use
		Premium	Monthly Premium
Subscriber-w/o Medicare	\$0	\$752.31	\$712.31
Subscriber- Medicare	\$0	\$333.40	\$293.40
Subscriber + Family-w/o			
Medicare	\$0	\$1,273.17	\$1,233.17
Subscriber + Family-			
Medicare	\$0	\$516.56	\$476.56
Subscriber 10ver/1Under	\$0	\$881.13	\$841.13

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)				
Tier MDC Standard Monthly *Non-Tobacco Use				
	Contribution	Premium	<b>Monthly Premium</b>	
Subscriber-w/o Medicare	\$221.41	\$451.19	\$411.19	
Subscriber- Medicare	\$80.82	\$190.10	\$150.10	
Subscriber + Family-w/o				
Medicare	\$379.17	\$744.15	\$704.15	
Subscriber + Family-				
Medicare	\$124.89	\$271.93	\$231.93	
Subscriber 10ver/1Under	\$237.79	\$481.61	\$441.61	

HDHP COBRA				
Tier	MDC Contribution	Standard Monthly Premium	*Non-Tobacco Use Monthly Premium	
Subscriber-w/o Medicare	\$0	\$686.05	\$646.05	
Subscriber-Medicare	\$0	\$276.34	\$236.34	
Subscriber + Family-w/o Medicare	\$0	\$1,145.79	\$1,105.79	
Subscriber + Family-				
Medicare	\$0	\$404.76	\$364.76	
Subscriber 10ver/1Under	\$0	\$733.79	\$693.79	

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

#### Voluntary Payroll Reduction Program (VPRP) 09-10

		<u> </u>	
TRADITIONAL PLAN			
Tier	MDC Contribution	Standard Member	*Non-Tobacco Use
		Premium	<b>Monthly Premium</b>
Subscriber-w/o Medicare	\$100.96	\$636.60	\$596.60
Subscriber- Medicare	\$41.50	\$285.36	\$245.36
Subscriber + Family-w/o			
Medicare	\$174.87	\$1,073.34	\$1,033.34
Subscriber + Family-			
Medicare	\$67.51	\$438.92	\$393.92
Subscriber 10ver/1Under	\$94.56	\$769.29	\$729.29

HIGH DEDUCTIBLE HEALTH PLAN (HDHP)					
Tier MDC Standard Monthly *Non-Tobacco Us					
	Contribution	Premium	<b>Monthly Premium</b>		
Subscriber-w/o Medicare	\$91.56	\$581.04	\$541.04		
Subscriber- Medicare	\$33.42	\$237.50	\$197.50		
Subscriber + Family-w/o					
Medicare	\$156.79	\$966.53	\$926.53		
Subscriber + Family-					
Medicare	\$51.64	\$345.18	\$305.18		
Subscriber 10ver/1Under	\$77.98	\$641.42	\$601.42		

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation

### **CONSERVATION EMPLOYEES' BENEFIT PLAN**

2013 Medical Insurance Premium Rate Structure

#### **VPRP 11**

TRADITIONAL PLAN			
Tier	MDC Contribution	Standard Member	*Non-Tobacco Use
		Premium	Monthly Premium
Subscriber-w/o Medicare	\$100.05	\$637.51	\$597.51
Subscriber- Medicare	\$45.23	\$281.63	\$241.63
Subscriber + Family-w/o			
Medicare	\$190.61	\$1,057.60	\$1,017.60
Subscriber + Family-			
Medicare	\$56.29	\$340.53	\$300.53
Subscriber 10ver/1Under	\$92.01	\$627.39	\$587.39

LUCU DEDUCTIDUE LIEALTU DI ANI (UDUD)				
HIGH DEDUCTIBLE HEALTH PLAN (HDHP)  Tier MDC Standard Monthly *Non-Tobacco Use				
1101	Contribution	Premium	Monthly Premium	
Subscriber-w/o Medicare	\$99.80	\$572.80	\$532.80	
Subscriber- Medicare	\$36.43	\$234.49	\$194.49	
Subscriber + Family-w/o				
Medicare	\$170.90	\$952.42	\$912.42	
Subscriber + Family-				
Medicare	\$56.29	\$340.53	\$300.53	
Subscriber 10ver/1Under	\$92.01	\$627.39	\$587.39	

<sup>\*</sup>With Subscriber and Spouse (if applicable) Signed Non-Tobacco Attestation